



# County of Los Angeles CHIEF EXECUTIVE OFFICE

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WILLIAM T FUJIOKA  
Chief Executive Officer

February 23, 2011

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From: William T Fujioka  
Chief Executive Officer



## **GENERAL RELIEF RESTRUCTURING PLAN: QUARTERLY UPDATE**

This is to provide a report on the progress of the implementation of the General Relief (GR) Restructuring Plan (RP).

On April 24, 2009, on a motion by Supervisor Knabe, your Board instructed the Chief Executive Officer (CEO), in collaboration with the Department of Public Social Services (DPSS), and consultation with County Counsel, to design a potential GR Program that will better assist GR participants, with the expectation that more of these individuals would be able to transition off of County assistance. In response, the GR Restructuring Workgroup (RW), consisting of 11 County departments and ten stakeholders, was convened. On February 9, 2010, your Board approved the comprehensive plan to restructure the GR Program. This plan consisted of 42 recommendations designed to reduce the GR caseload over time by focusing services on housing assistance, Supplemental Security Income (SSI) advocacy, and employment preparation.

The GR RW members were invited to participate in various workgroups that were convened by DPSS to assist in the implementation of the plan. Several internal DPSS meetings, and meetings with other County departments and community stakeholders, have taken place to discuss the implementation of the various GR restructuring projects. As a result of the great support and collaboration from the different partners, 13 GR Restructuring Recommendations have already been implemented and substantial progress has been made on numerous additional recommendations.

### **PERFORMANCE DATA ON KEY GR RESTRUCTURING PROJECTS**

- Recommendation No. 5 - Expansion of the Housing Subsidy Project (HSP)

The GR Housing Subsidy Program has a total of 1540 slots. The slots will increase over time, as funding becomes available through the GR Anti-Homelessness Account (AHA).

*"To Enrich Lives Through Effective And Caring Service"*

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Currently, there are 1,035 individuals receiving a housing subsidy and 303 subsidies pending approval.

- Recommendation No. 8 - Mental Health Assessments

Department of Mental Health (DMH) reported that in December 2010, its Clinicians saw 815 participants and determined that 792 of them have a mental health disability, of which 227 have a permanent mental health disability. This translates into 28.6 percent of individuals assessed as having a permanent mental health disability, compared to only 1.5 percent under the prior more cursory mental health screening conducted by non-licensed DMH staff. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services. If approved for SSI, these individuals will exit GR.

- Recommendation No. 9 - Record Retrieval Project

This project requires collaboration with Department of Health Services (DHS), DMH, and the Los Angeles County Sheriffs' Department (LASD) to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Since inception of the Project in August 2010, DPSS has received a total of 385 sets of medical records from DMH, DHS, and LASD.

An update on all 42 GR restructuring projects is provided on the attached GR Restructuring Master Implementation Chart. We will provide the next quarterly report in May 2011.

If you have any questions, please let me know or your staff may contact Kathy House, Assistant Chief Executive Officer at (213) 974-4530, or [khouse@ceo.lacounty.gov](mailto:khouse@ceo.lacounty.gov).

WTF:KH:DS  
JB:ljp

Attachment

c:     Executive Officer, Board of Supervisors  
         County Counsel  
         Children and Family Services  
         Community and Senior Services  
         Health Services  
         Mental Health  
         Probation  
         Public Defender  
         Public Health  
         Public Social Services  
         Sheriff's Department

**GR RESTRUCTURING MASTER IMPLEMENTATION CHART**  
**DECEMBER 31, 2010**

**Attachment**

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	<p>Subject to applicable confidentiality requirements, use the Adult Linkages Project mechanism to identify the County service history of GR applicants/participants, so that applicants/participants can be offered services that take into account the totality of their individual circumstances.</p> <p>On November 16, 2010, the Board of Supervisors approved the Enterprise Linkage Project (ELP), and an agreement with SAS Institute as the contractor for implementing this expansion of the Adult Linkages Project (ALP). A draft Master Memorandum of Agreement (MOA) between the CEO and the eight County departments, who will be sharing data for this project, was distributed for review and comments. Kick-off meeting is scheduled for February 9, 2011.</p>	<p>The Chief Executive Office (CEO) approved funding for the one-time cost implementation of this recommendation. CEO-SIB is currently working with SAS (contractor), DPSS, and County Counsel to develop the system that will be used by DPSS eligibility staff to access real time service utilization records for GR applicants/participants.</p>	<u>JUNE 2011</u>
2	<p>The County should develop an innovative service integration model that can support County departments, other governmental entities, and community partners in concurrently serving a shared clientele.</p> <p>Increase integration of services between the Sheriff's Department and DPSS by:</p> <ul style="list-style-type: none"> <li>A. Developing a plan to enhance the current County jail match to identify individuals who are incarcerated and have a linkage to GR benefits, to provide pre- and post-release services and SSI Advocacy that will assist with their re-entry into society.</li> <li>B. Assessing the DPSS/Sheriff's Homeless Release Project to determine its effectiveness.</li> <li>C. Implementing a review protocol to determine whether any outstanding warrants remaining on the GR/SSI applicant's record should be cleared, recalled or withdrawn.</li> <li>D. Ensuring that probation, parole, and other warrants that should have been satisfied by a GR/SSI applicant's stay in jail have been withdrawn or recalled.</li> <li>E. Appointing a liaison for individuals with outstanding warrants are resolved prior to releasing inmates.</li> </ul>	<p>Research is still pending on this project.</p>	<u>DECEMBER 2011</u>
3		<p>A meeting was held on July 7, 2010 with the designated workgroup, which includes DPSS, Sheriff, Public Defender and a representative from the Public Social Services (PSS) Commission.</p> <p>The Department of Public Social Services (DPSS) presented an overview of the current Jail Match and enhancements were recommended. Additionally, an overview of the Public Social Services (PSS) Homeless Project was presented.</p>	<u>FEBRUARY 2011</u>

Note: New updates are underlined

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1	<p>warrants whom advocates and County employees can contact directly to: (1) inquire about the underlying reason and validity of a warrant and (2) assist the SSI advocate in "clearing up" the warrant.</p> <p>F. Referring disabled individuals exiting jail who apply for GR to a SSI advocate/liaison, in order to re-establish SSI benefits and work with agencies (i.e., probation, parole, public defender, courts, etc.) to recall existing warrants.</p> <p>G. Referring disabled individuals exiting jail who do not have SSI benefits to GR SSIMAP for benefits establishment.</p>	<p>A second meeting was held on September 9, 2010. DPSS and LASD are working to identify additional data fields for the jail match listing to ensure more matches are made when the listing is run. The workgroup also discussed ways to clear warrants for potentially Supplemental Security Income (SSI) eligible inmates who have prior GR history. A Custody Assistant candidate has been identified to be a liaison between staff and the LASD to help clear warrants for potentially SSI eligible inmates who have prior GR history.</p> <p>A sub-workgroup meeting was held on December 14, 2010 to develop a referral process to refer released inmates to DPSS for SSI advocacy. Additionally, an IT meeting was held on January 12, 2011, to discuss the jail match process between LASD and DPSS. The CEO SIIB was in attendance. Suggestions made at the meeting to enhance the jail match are currently under review.</p>	<u>DECEMBER 2011</u>
2	<p>Encourage police agencies to make social services referrals for the homeless and connect them with resources, rather than issuing citations.</p>	<p>A meeting was held on June 17, 2010 with the Long Beach Police Department, L.A. County Sheriff's Department and Community partners.</p> <p>The Long Beach Police Department and LASD provided an overview of their services to the homeless population.</p> <p>DPSS will work with the police agencies to create a simple informational document in multiple languages to distribute to the homeless and connect them to services. LASD has agreed to draft the informational document.</p> <p>The follow-up meeting tentatively scheduled for October 2010 with the Los Angeles Police Department and Community Advocates did not take place. The informational document had not been finalized to share at the meeting. LASD has the lead on this document. A meeting with LASD is being requested to re-assess the document information.</p>	<u>DECEMBER 2011</u>
3	<p>Enhance Subsidized Housing by:</p>	<p>The following key points were implemented in the Administrative Directive which was released to Project staff on August 2, 2010, for instructions and procedures:</p>	<u>IMPLEMENTED AUGUST 2010</u>

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	<p>A. Increasing the total number of housing subsidies to 10,000 by December 2014.</p> <p>B. Increasing the number of housing subsidies for homeless disabled GR participants pursuing, or willing to pursue, SSI and/or veterans benefits, so that 100% of homeless disabled GR participants pursuing SSI and/or veterans benefits are offered a housing subsidy within 5 years.</p> <p>C. Increasing the number of housing subsidies for homeless, employable GR participants.</p> <p>D. As in the current GR Housing and Case Management Project:</p> <ul style="list-style-type: none"> <li>a. Subsidized housing itself should not be time-limited, allowing people to stay as permanent residents, after they start receiving outside income and can pay for their housing.</li> <li>b. The housing subsidy should be encouraged, but not required.</li> </ul> <p>E. Increasing the GR rental subsidy amount from \$300 to \$400 and reducing the participant's contribution from the grant from \$136 to \$100, so the total amount available for rent will be \$500.</p> <p>F. Pursuing federal reimbursements for housing subsidy payments made to employable GR participants through the Food Stamp and Employment Training (FSET) fund at a rate of 50%; and pursuing reimbursement for housing subsidy payment made to GR participants who are approved for SSI through the Interim Assistance Reimbursement Program, at a rate of 100%.</p> <p>G. Reinvesting the money recouped from SSI (Interim</p>	<p>A. The GR Housing Subsidy Pilot has been expanded to include an additional 640 housing subsidy slots, bringing the total slots from 900 to 1,540. The current implementation plan projects to increase the housing subsidies based on the savings generated by GR participants who receive a housing subsidy and exit GR with work or disability benefits.</p> <p>B. &amp; C. The new 640 housing subsidies added to the Pilot were allocated as follows: 320 for GR employable participants and 320 for GR disabled participants pursuing SSI and/or veterans benefits.</p> <p>D. Incorporated in the implementation Administrative Directive.</p>	

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1	Assistance Reimbursement for housing subsidies) in additional housing subsidies.	H. Recruiting participants for the Housing Subsidy and Case Management Program during the GR intake process and making additional efforts throughout the course of case management to encourage participants to remain in the Housing Subsidy and Case Management Program and identify causes of participants dropping out of the subsidy.	H. Two training sessions were conducted on July 15, 2010 to provide Project Staff, intake and approved eligibility staff, GROW Case Managers and SSI Advocates with the new procedures on the expansion of the Housing Subsidy Pilot Program.  August 2, 2010, The final approved Administrative Directive was released and the expansion of the Housing Subsidy Pilot Program was implemented.
6	Implement a pilot project (subject to a cost benefit analysis) by master leasing and/or purchasing foreclosed apartment buildings and/or multi-family housing units and/or dorm-like housing to be provided for the indigent homeless population. This housing should be owned and/or operated by a non-profit housing developer and/or homeless service provider with expertise in managing housing with services.	Research is still pending on this project.	DECEMBER 2011
7	Address supportive housing needs by:  A. Exploring housing options for mentally ill participants through City and County Housing Authorities and other smaller Housing Authorities throughout LA County.  B. Identifying and leveraging County funding for housing resources and related services that already receive county funding or support.	A. DMH and DPSS staff held a pre-meet on April 27, 2010, to discuss possible housing experts and providers to be invited to assist with the implementation on this effort. A list of potential collaborative agencies was developed. The responsible workgroup met on June 24, 2010, to discuss the implementation plan for this project.  B. Additionally, Los Angeles Homeless Services Authority (LAHSA) staff made a presentation on Project 50. MHSA, A Community of Friends and some local missions were identified as agencies that offer potential housing options to mentally ill GR participants who meet their criteria.	DECEMBER 2011

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	<p>of the projects identified have limited funding. However, A Community of Friends, which is funded by the Community Development Commission (CDC) will be further explored.</p> <p>Project on target for implementation.</p>		
	<p>Subject to detailed operational and fiscal planning during Phase Two of the GR Restructuring process, eliminate the current cursory employability/NSA screening and replace it with a more extensive medical/mental health disability assessment performed by (1) DMH, (2) DHS or possibly DPH, and/or (3) DHS Public Private Partners (PPPs). For permanently disabled participants in need of additional documentation to support their SSI applications, a comprehensive medical/mental health evaluation would be performed. The extensive assessments and the comprehensive medical and mental health evaluations and write-ups will be funded with 50 - 75% new federal revenue.</p>	<ul style="list-style-type: none"> <li>• New mental health assessment training completed on October 28, 2010.</li> <li>• DMH staff began conducting the new mental health assessments on October 12, 2010, at Metro Special, Metro East, San Fernando, Pasadena and Wilshire Offices. DMH will expand to all Districts on a staggered basis.</li> <li>• DMH submitted staff roll-out plan on October 5, 2010.</li> <li>• DMH reported that in December 2010 its Clinicians saw 815 participants and determined 792 of them to have a mental health disability, of which 227 have a permanent mental health disability. This translates into 28.6% of individuals screened having a permanent mental health disability compared to only 1.5% prior to implementation. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services.</li> <li>• The implementation of the new mental health disability assessments began with a DMH roll-out plan for the first group of ten Psychiatric Social Workers (PSWs) in October 2010, and was completed on December 27, 2010. Some new mental health assessments are now being done at 12 of the 14 GR District Offices.</li> <li>• DMH began the hiring process for eight additional PSWs and one Supervisor in January 2011. April 2011 is the target date to finalize hiring of all staff.</li> </ul>	<p>PARTIALLY IMPLEMENTED OCTOBER 2010</p> <p>FULL IMPLEMENTATION TARGETTED FOR APRIL 2011</p>

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		<p><u>Mental Health Disability Comprehensive Evaluation</u></p> <ul style="list-style-type: none"> <li>• The workgroup met to discuss mental health comprehensive evaluations on November 17, 2010.</li> <li>• DMH agreed to draft an evaluation tool for the next meeting.</li> <li>• DMH submitted the budget for the Comprehensive Evaluations.</li> <li>• A Meeting was held with DMH and DPSS GR Program staff to discuss the comprehensive evaluations. DMH shared its draft comprehensive evaluation tool.</li> </ul> <p><u>Medical Disability Assessment/Comprehensive Evaluations</u></p> <p>Subsequent to the Board's approval of this recommendation, the County Counsel for DHS determined that the medical disability assessments fall outside of the scope of the existing contracts with DHS' Public Private Partners (PPPs) and, thus, neither the medical disability assessments nor the comprehensive evaluations can be implemented through an amendment to current PPP contracts.</p> <p><u>DPSS will release a Request For Information (RFI) in an effort to identify Federally Qualified Health Centers (FQHC) and/or FQHC-like to provide the Medical Disability Assessment Services from May 1, 2011 until sometime in 2012. A competitive procurement process will be initiated during 2011 to secure one or more ongoing contractors beginning in 2012.</u></p>	MAY 2011

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	DHS, DMH, and LASD to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Most of the costs will be funded with 50% new federal revenue.	<p>Project protocols were released and SSI Advocacy staff trained. DPSS continues to meet with DMH, DHS and LASD to clarify issues, exchange best practices and measure the progress made.</p> <p>DHS has finalized hiring all seven Registered Nurses (RNs). DMH is in the process of hiring both of its RNs. The RN previously reported as hired did not take place. LASD has identified one RN who will work in this project on an interim basis until LASD hires a permanent staff person.</p> <p>A comprehensive training for RNs was conducted on August 13, 2010. Training presenters included staff from SSA, DDSD and DHS.</p> <p>The project was implemented in August 2010.</p> <p>DHS, DMH and LASD are now processing pre-clearance requests and retrieving medical and mental health records. <u>All</u> departments are now fully staffed for this project.</p>	<u>IMPLEMENTED AUGUST 2010</u>

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10	Maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI and Medi-Cal.	Preliminary teleconference meetings with DPSS, DMH, and DHS were held in June 2010 to further discuss the data needs for this project.  A listing of GR participants who were approved for Supplemental Security Income (SSI) will be transmitted to DMH and DHS on a monthly basis. The first report was forwarded to DMH and DHS in September 2010. This list is a key factor in allowing them to significantly improve their retroactive Medi-Cal claims processing efforts for GR participants who were recently approved for SSI.	IMPLEMENTED <u>SEPTEMBER 2010</u>
11	Integrate the Public Defender (PD) into SSI Advocacy, where GR participants are already clients of the Public Defender and advocacy can be combined with clients' representation in court.	PD identified the Compton Courthouse as the location for this project. Staff has been selected. One DPSS SSI Advocate and one PD Psychiatric Social Worker II will be collocated at the PD site to provide SSI Advocacy services. A <u>workgroup meeting</u> was held in November 2010. The MOU project protocols and equipment installation are being finalized.	<u>FEBRUARY 2011</u>
12	Modify the GROW Program to:  A. Customize services to individuals who are classified as: 1. Transitional Age Youth (TAY); 2. Veterans; and 3. Participants exiting Mandatory Substance Abuse Program (MSARP).	A. 1. The implementation plan for this project is being finalized by the workgroup. Items that need to be finalized include GROW Computer Programming changes; curriculum for specialized job club class by LACOE; instructions to staff. Implemented in January 2011. The plan is comprised of <u>two new GROW components designed to address the special needs of TAY participants. The components include a specialized job club for TAY participants at one GROW location and a new, advanced Computer Applications Class for TAY with strong, basic computer skills.</u>  A.2. The implementation plan for this project is being finalized. Items that need to be finalized include compiling list of available resources and distribution of outreach material for referrals to Weingart Center. A mass mailing will be completed this month to send out information to all identified GR/GROW Veterans.  A.3. The implementation plan for this project is in progress.	<u>FEBRUARY 2011</u>  <u>FEBRUARY 2011</u>  <u>FEBRUARY 2011</u>

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12	<p>B. Create a new voluntary category of GR participants who will be classified as employable with accommodations and will be referred to a new GROW component designed to provide employment services for individuals who can work with accommodations. Volunteers would not be subject to sanctions.</p> <p>C. Enhance services for Needs Special Assistance (NSA) participants by providing them voluntary employment preparation services and mental health treatment through the GROW Program. Volunteers would not be subject to sanctions.</p> <p>D. Establish collaboration between DPSS, DCFS, and Probation to provide enhanced services to GROW participants ages 18-24 who come out of foster care and probation.</p> <p>E. Develop a comprehensive and ongoing evaluation plan of GROW to track outcomes for GR participants, including, but not limited to, education and training outcomes, length of employment obtained through GROW, and recidivism.</p>	<p>Items pending include computer enhancements from LEADER to track progress and completion of MSARP treatment ; once this process is completed, information will be interfaced to MAPPER for expansion of services to qualifying participants. Expected completion date is <u>February 2011</u>.</p> <p>B &amp; C. Projects 12 B&amp;C were implemented on August 2, 2010 with limited services. Full implementation of this project is in progress. Items pending completion include amendments to GROW contracts to incorporate services to volunteers and some programmatic changes. Target date for full implementation is <u>March 2011</u>.</p> <p>D. A workgroup meeting took place on August 26, 2010 to discuss action items needed to implement this project. A follow-up conference call with DCFS/Probation to discuss finalizing the implementation plan took place on September 13, 2010.</p> <p>E. An internal DPS meeting took place in April 2010. Future follow-up meetings will be scheduled after the implementation plans have been further developed, in order to determine the best way to track relevant information.</p>	<u>MARCH 2011</u> <u>FEBRUARY 2011</u> <u>JUNE 2011</u>
13	Establish collaboration between DPSS and the Probation Department to reduce the number of Emerging Adults (age 18-24) applying for GR benefits.	DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to GROW services, including American Recovery and Reinvestment Act (ARRA) Projects. DPSS has designated a liaison to work with both departments	<u>IMPLEMENTED</u> <u>MAY 2010</u>

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		on this effort.  This project was completed in May 2010.	
14	Pursue federal reimbursement through FSET, at a rate of 50%, for mental health, domestic violence, and, to the extent possible, substance abuse services provided to GROW participants.	The DPSS plan that was submitted to the State was approved on May 5, 2010. Reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2009.	IMPLEMENTED MAY 2010
15	Establish collaboration with CSS, L.A. City and all other Workforce Investment Boards to provide job services and employment opportunities through the Work Source Centers, geared toward both youth and adult GROW participants.	The workgroup for this project has been meeting monthly to develop a collaborative plan to provide comprehensive employment services to GROW participants. The following WorkSource Centers and One Stops want to participate in this project: <u>The Gardena South Bay One-Stop Business &amp; Career Center</u> , <u>Inglewood South Bay One-Stop Business &amp; Career Center</u> , <u>Southeast Los Angeles County Workforce Investment Board Youth Center</u> , <u>Southeast Los Angeles County Workforce Investment Board Youth Center, Southeast Los Angeles Crenshaw WorkSource Center</u> .	FEBRUARY 2011
16	Expand GROW to include GED preparation.	DPSS has informed the responsible workgroup of this project and there were no objections to this proposal.	IMPLEMENTED JUNE 2010
17	Conduct a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP) to evaluate its effectiveness.  A. DPSS and DPH-ADPA will evaluate the redesign of MSARP based upon the results of the evaluation. B. Use the evaluation outcomes and DPH-ADPA Rate Study to inform a resolicitation process for GR services.	CEO-SIB staff has shared a draft report, which was discussed during a meeting with DPSS staff. The data match with DPH was completed and merged with DPSS data in preparation for analysis. CEO-SIB is currently conducting the analysis.	FEBRUARY 2011

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	C. Evaluate the need for substance abuse treatment services for emerging adults ages 18-24 and the need to design specialized treatment services for this population.		
18	Develop State and federal legislative/regulatory proposals to assist indigent adults and/or mitigate County costs and work with stakeholders to develop these proposals.	DPSS is examining possible areas where legislative and regulatory changes may be necessary and feasible. The workgroup has identified ten (10) potential concerns that with further research may formulate into a State or Federal legislative proposal for indigent adults. The last workgroup meeting was held on November 23, 2010.	<u>MARCH 2011</u>
19	DPSS to expand data collection for the GR Program.	A meeting to discuss data collection and computer programming for all SSI Advocacy-related recommendations was held on June 22, 2010. GR data, including GR Restructuring Data, will be collected and made available through DPSSSMART, SSIMAP database. Data collection is an ongoing effort.	IMPLEMENTED AUGUST 2010 Ongoing
20	Include the GR Program in the County's and DPSS' strategic plans.	The GR Program has been incorporated in the County's and DPSS' Strategic Plan.  The County's Strategic Plan Objectives are:  <b>Objective 2:</b> General Relief to SSI: By June 30, 2010, assess the success of the implementation of the GR to SSI project, working with the Department of Public Social Services, Health Services, Mental Health, and Public Health staff. Based upon the evaluation, determine whether to continue program and/or integrate with GR Efficiencies Initiative.  <b>Objective 3:</b> By June 30, 2010, to achieve GR Efficiencies, develop recommendations with stakeholders, present plan to the Board of Supervisors, and begin project implementation.	IMPLEMENTED APRIL 2010

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21	Conduct a pilot having the current Linkages GAIN Services Workers at two or three small DCFS offices work with the Children's Social Workers to utilize the Transition Conference as an opportunity to connect foster youth with County services.	The workgroup for this project met on August 26, 2010. A follow-up conference call with DCFS/Probation to discuss finalization of the implementation plan took place on September 13, 2010. <u>Draft policy/procedures will be released for clearance in February 2011.</u>	<u>FEBRUARY 2011</u>
22	Provide better screening for Veterans and better referrals for assistance with claims and strengthen DPSS case management for Veterans who are on GR to enable them to qualify faster for Veteran's benefits and services.	<p>An initial meeting was held in June 2010 with Legal Aid Foundation of Los Angeles (LAFLA), Public Counsel, and Department of Military and Veterans Affairs (DMVA).</p> <p>Project protocols for the DPSS/LAFLA pilot have been drafted and shared with the responsible workgroup. Comments were received from the workgroup in June 2010.</p> <p>Currently working with Public Counsel to develop a resource guide for Veteran participants.</p> <p>A second meeting was held on August 17, 2010, with LAFLA to discuss the implementation of the pilot project.</p>	<u>PARTIAL IMPLEMENTATION</u> <u>DECEMBER 2010</u>
23	Assess and enhance the current mechanisms designed to enable former foster care youth, medically indigent under 21 and probation youth to receive and retain Medi-Cal.	<p>The DPSS/LAFLA Veterans pilot will be conducted in the Metro East office and is scheduled to begin on October 12, 2010. Space arrangements for LAFLA staff at the Metro East office are being made. Policy for this project has been drafted and is in the clearance process.</p> <p><u>The AD for the Veterans pilot was officially released in December 2010.</u></p> <p><u>A telephone conference call was held on December 20, 2010 between DMVA and DPSS to discuss the next steps to implement the project. Action items to implement the project are being worked on to move the project forward. An IT meeting between DMVA and DPSS is tentatively scheduled for the second half of February 2011.</u></p> <p>An internal meeting was held on May 25, 2010 to discuss current DPSS efforts on this subject.</p>	<u>FULL IMPLEMENTATION</u> <u>FEBRUARY 2011</u>

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	<p>Children in foster care automatically continue on Medi-Cal until they reach age 21; however, 50% of cases are terminated at redetermination for failure to respond, <u>mainly due to DPSS not having the individuals' current address.</u></p> <p>DPSS and DCFS have established a liaison to share address changes reported by the youth and thereby update their databases. Additionally, DPSS is in the process of finalizing a change of address card for former foster youth to mail to DPSS to report a change of address.</p> <p>DPSS is currently taking Medi-Cal applications at probation camps only for minor consent services (Medi-Cal for individuals who need continuous services; e.g., pregnancy, mental health treatment, counseling, drug and alcohol abuse).</p> <p>DPSS completed a data interface system to identify youth who are soon to be released from the probation system.</p>	<p>MAY 2011</p>	
24	<p>Increase the GR Participants resources by:</p> <p>A. Allowing GR recipients to remain on GR while saving more money. Permit GR participants to maintain a Restricted Savings Account up to a pre-determined amount for the purpose of saving for housing, education</p>	<p>A. <u>Research is still pending on the viability of implementing this segment.</u></p>	

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	or training expenses, and/or to start a business that would not be countable towards the property limit.	B.1. Draft protocols will be developed to educate DPSS staff on assisting GR participants with lowering their child support payments.	<u>DECEMBER 2011</u>
	B. Helping participants who have child support obligations by: 1. Educating workers and participants about the assistance DPSS currently offers to help lower child support payments for participants.	B.2. The tentative meeting with the Child Support Services Department scheduled for July 2010 did not take place. A new meeting will be held in March 2011.	
25	2. Work with the Child Support Services Department to reduce child support payments for participants after they leave GR for the first six months they have a job, to allow them to get on their feet before resuming higher child support payments.		
26	Add positions in GR offices, through September 30, 2010, utilizing TANF emergency contingency funds (ECF), to assist GR participants navigate the GR process. Positions may be filled with GR non-custodial parents (NCPs) who qualify for ECF-funded subsidized employment.	This project was completed with the hiring of six participants who worked as Customer Services Assistants (CSAs) in the GR Districts lobby until September 30, 2010, when the available funding ended.	IMPLEMENTED MAY 2010
27	CEO-SIB to conduct an evaluation of GR Program mandates, rules, time limits, sanctions, operational processes, and data limitations, including a cost/benefit analysis.	CEO-SIB identified two contractors to conduct the evaluation of the GR Program. The first contractor secured to perform the Quantitative Process Analysis of Los Angeles County's GR Program is University of Sciences in Philadelphia.	MARCH 2011
		The second contractor secured to perform the Qualitative Process Analysis of Los Angeles County's GR Program is Linda Shaw, Ph.D., from California State University San Marcos. An action plan was developed by the contractors to convene focus groups to interview Eligibility Workers and Administrative staff. These focus groups were convened in August 2010. Researchers convened focus groups and interviewed GR participants in January 2011.	JUNE 2011
	Establish a GR Anti-Homelessness Account in the CEO's Assistance budget in August 2010.	The Anti-Homelessness Account was set up in the DPSS	IMPLEMENTED AUGUST 2010

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	budget to fund enhanced services to reduce GR homelessness. Fund this account with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI.		
28	<p>Assist GR participants manage their money better by:</p> <ul style="list-style-type: none"> <li>▪ Formulating a list of banks that allow recipients to establish accounts with no minimum balances and minimal overdraft fees.</li> <li>▪ Assembling training materials instructing clients about budgeting and money management as well as the security advantages of keeping their funds in a bank account. The instruction topics would also include balancing their check book, if utilizing an ATM to check their account status, and avoiding bank fees.</li> <li>▪ Focusing on providing this information to GR participants securing SSI benefits.</li> <li>▪ Engaging with community organizations involved with assisting individuals with money management issues.</li> <li>▪ Seeking volunteer agencies who will offer training or assistance to GR participants on money management.</li> </ul>	<p>Three workgroup meetings have been conducted to brainstorm and develop an implementation plan. Met with representatives from a local bank to learn what they can offer to GR participants and what training they can provide to Supplemental Security Income Medi-Cal Advocacy Program (SSIMAP) staff. A focus group meeting was conducted with SSI Advocates on August 19, 2010, to better define their role under this recommendation.</p> <p>Money management training for SSIMAP staff was conducted by Consumer Action in October 2010. Draft policy/procedures were released for clearance in January 2011, and will be finalized to be released to staff in February 2011.</p>	FEBRUARY 2011
29	Do not limit the housing subsidy to 9 months for employable GR participants. Instead, permit employable GR participants who reach the 9-month time limit to continue receiving the subsidy during the 3 months that they are ineligible to GR.	A LEADER Change Request has been initiated to allow employable GR participants to receive housing subsidy after they reach the 9-month time limit.	DECEMBER 2011
30	DPSS should engage in a dialogue with board and care operators to determine how to increase usage of board and care facilities by homeless GR participants. Explore providing information to GR participants on board and care facilities upon release from emergency rooms or hospitals.	<p>A meeting with two Board and Care agencies to discuss other housing options for homeless GR participants took place on June 23, 2010.</p> <p>A meeting with the Workgroup was conducted on August 16, 2010 to discuss and identify an approach to start the dialogue with the board and care operators.</p>	MARCH 2011

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	<p><u>DPSS plans to draft a letter to outreach to Board and Care operators to see if they will be interested in providing housing to homeless participants. Board and Care operators will be provided information about the need for housing for GR homeless individuals and the opportunity to collaborate with DPSS. Those who are interested will be instructed to call DPSS to further discuss the project.</u></p>		<u>JUNE 2011</u>
31	<p>Improve upon DPSS' GR SSI and Medi-Cal Advocacy Program (GRSSIMAP) by:</p> <ol style="list-style-type: none"> <li>1. Advocating for a change in federal regulations that would extend the protected filing date from 60 days to as many as 365 days, to increase the period of time during which the County could secure Interim Assistance Reimbursement for GR grants/rental subsidies and retroactive Medi-Cal.</li> <li>2. Customizing the approach to securing SSI based on the condition and available documentation for individual GR participants by:           <ul style="list-style-type: none"> <li>• Better identifying GR participants who are potentially eligible for SSI through a more extensive medical and/or mental health disability assessment (approved in Phase One).</li> <li>• Evaluating available medical treatment documentation and utilizing the document retrieval process (approved in Phase One), if necessary.</li> </ul> </li> </ol>	<p>DPSS is in the process of drafting and submitting a proposal to SSA to propose changes at the local level, as an alternative to seeking a change in federal regulations.</p> <p>2. The responsible workgroup met on November 18, 2010. A meeting with a focus group comprised of community and SSI Advocates will be scheduled for February 22, 2011, to review a new approach for the development of a GR SSI MAP Handbook to define guidelines for the SSI Advocates.</p>	<u>MAY 2011</u>

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	<ul style="list-style-type: none"> <li>• Evaluating whether a comprehensive medical/mental health evaluation (approved in Phase One), and the resulting write-up would strengthen the SSI application, and, if so, refer the participant for an evaluation.</li>   <li>• Making an appropriate decision about when to file the SSI application in order to increase the chance of approval, based on the participant's situation and the results of any assessments, medical documentation, and/or evaluation.</li>   <li>3. Implementing the SSI/SSDI Outreach Access and Recovery (SOAR) principles and strategies.</li>   <li>4. Seeking training from Social Security Administration for DPSS SSI advocates on SSI medical disability standards and case development.</li>   <li>5. Developing the disability assessment and evaluation tools in consultation with medical/mental health professionals and experienced SSI advocates.</li> </ul>	<p>The responsible workgroup met on November 18, 2010. A meeting with a focus group comprised of community and SSI Advocates will be scheduled for February 22, 2011 to review a new approach for the development of a GR SSIMAP Handbook to define guidelines for the SSI Advocates.</p> <p>3. SOAR training has been completed. The last SOAR training session was held on September 30, 2010.</p> <p>4. SSA committed to provide training to DPSS staff. Future meetings with SSA will be held to finalize the training schedule.</p> <p>5. See update for Recommendation #8.</p>	<u>IMPLEMENTED</u> <u>SEPTEMBER 2010</u>  <u>APRIL 2011</u>  <u>PARTIALLY IMPLEMENTED</u> <u>OCTOBER 2010</u>
32	Provide ancillary expenses for showers, shoes, clothes, etc., for those pursuing SSI, including a motel voucher for the night before an SSI appointment with California Department of Social Services or Social Security Administration, when needed to enable the participant to arrive on time.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates to discuss the different ways of implementing the recommendation was held on June 23, 2010. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.	<p>The workgroup met on September 22, 2010 and December 7, 2010 to review the draft guidelines. Training was held in January 2011. We are in process of finalizing guidelines.</p>
33	Collaborate with private medical facilities to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI as part of the current	The Hollywood Presbyterian and White Memorial hospitals were not available to meet in August, as initially expected. However, both hospitals expressed interest in this project and	MARCH 2011

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	DPSS-DHS homeless release project.	agreed to meet sometime in October to hear more details about the project. However, hospital staff were unable to meet in October. An official invitation to participate in the Record Retrieval Project will be mailed to the Hollywood Presbyterian and White Memorial hospitals in February 2011.	
34	<p>Assist GR participants applying for SSI benefits by:</p> <ul style="list-style-type: none"> <li>▪ Identifying GR participants who are in need of mental health treatment to secure medical documentation needed to secure SSI;</li> <li>▪ Subject to funding, providing mental health treatment to those participants;</li> <li>▪ Prioritizing mental health services for GR participants who need to pursue SSI;</li> <li>▪ Documenting those who cannot be treated due to lack of funding;</li> <li>▪ Ensuring cost recoupment from retroactive Medi-Cal;</li> <li>▪ Assessing current procedures for providing mental health treatment to GR participants; and</li> <li>▪ Recommending changes to better keep participants engaged in treatment.</li> </ul>	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>A second workgroup meeting was held on September 7, 2010. DMH, DPH, and Advocate Representatives were present. The group discussed the recommendation and how to identify the participants in need of treatment to secure SSI and the need to document those who cannot be treated due to lack of funds. Some suggestions were made, but the lack of available funding was a barrier. <u>A third workgroup meeting was held in October 2010.</u></p>	<u>MAY 2011</u>
35	DPSS SSI Advocates should provide case management that will help GR SSI applicants keep track of appointments.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.	<u>MARCH 2011</u>

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36	Pursue a pilot to coordinate ongoing health and mental health treatment for GR participants pursuing SSI, dependent upon available funding.	The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.  The workgroup met again on September 7, 2010 to discuss pursuing the recommended pilot. The group discussed the lack of available funding and the possibility of a pilot in an area that has both a DPH health clinic and a DMH mental health facility in close proximity. <u>The workgroup met in October 2010.</u>	<u>SEPTEMBER 2011</u>								
37	Strengthen current process to identify GR participants who were previously on SSI and prioritize SSI advocacy for them.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.  DPSS is in the process of finalizing the guidelines for SSI Advocates. <u>The responsible workgroup met on December 7, 2010.</u>	<u>MARCH 2011</u>								
38	Establish the following targets for SSI Approvals:  1. For SSI applications filed in FY 10/11 and ongoing, increase the SSI approval rate at the initial application level to at least 50% in FY 10/11, to at least 60% in FY 11/12, and to at least 70% in FY 12/13.  2. For the overall number of SSI approvals, increase the number of SSI approvals as follows:	The workgroup meeting to discuss different ways of accomplishing the targets for SSI approvals was held on June 24, 2010.  After all of the GR recommendations are implemented, the Advocates believe that they will have additional tools to enhance services to participants and to assist with more complete applications being submitted to SSA for SSI approval.  <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <th>FY 2008-09 Baseline</th> <th>FY 2010-11 Target</th> <th>FY 2011-12 Target</th> <th>FY 2012-13 Target</th> </tr> <tr> <td>5891</td> <td>6400</td> <td>6900</td> <td>7400</td> </tr> </table>	FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target	5891	6400	6900	7400	IMPLEMENTED JUNE 2010 and ongoing
FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target								
5891	6400	6900	7400								
39	Address/fix non-disability related SSI eligibility issues such as citizenship documentation, birth certificate, etc.	The responsible workgroup meeting with all partners was held on June 24, 2010.	<u>MARCH 2011</u>								

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		<p>A second Workgroup meeting was held on August 29, 2010. The SSI Advocates exchanged valuable tips on how to resolve non-disability SSI eligibility issues. We are currently drafting a document to show how non-disability issues may be addressed. This document will be shared with DPSS line staff.</p> <p>Document was drafted and presented during Workgroup meeting on December 2, 2010. The Workgroup provided valuable input. A document is in the process of modification to reflect the Workgroup's input. Document is to be part of GR SSIMAP Handbook.</p>	IMPLEMENTED AUGUST 2010
40	<p>Strengthen existing relationships with the Social Security Administration.</p>	<p>An upper level management meeting with the Social Security Administration, Veterans Administration, CEO and various County Departments was held on June 22, 2010. The purpose of the meeting was to stress the importance of collaboration among departments for the successful implementation of the GR Restructuring projects.</p>	IMPLEMENTED AUGUST 2010
41	<p>Implement a transportation pilot project to evaluate the impact of providing monthly bus passes to two groups of GR participants to determine whether providing bus passes (instead of individual tokens) increases their likelihood of approval for SSI:</p> <ol style="list-style-type: none"> <li>1. GR participants pursuing SSI, and</li> <li>2. GR participants receiving a housing subsidy and pursuing SSI.</li> </ol> <p>The pilot will consist of 200 GR participants. Each participant will contribute \$10 per month toward the cost of the bus pass.</p>	<p>A meeting with the responsible workgroup to discuss the project's course of action was held on June 24, 2010.</p> <p>A second workgroup meeting was held on September 22, 2010, to review the draft guidelines for the pilot.</p>	<p>A third workgroup meeting was held on December 7, 2010 to determine the District Offices for the pilot and the method of issuance for the pilot. A fourth meeting was held in January 2011 to determine the valid survey reports needed and logistics of implementation based on availability of monthly bus pass issuance from the Transit Access Pass card program that the Auditor-Controller is negotiating with the Los Angeles</p>

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	<p>Results will be compared after one year of the pilot. If providing bus passes is shown to be a good method of helping participants obtain approval of SSI benefits more quickly, DPSS will then explore ways of providing them to more participants.</p>	<p>Metropolitan Transportation Authority.</p>	
<p>42</p> <p>Reconstitute the GR Restructuring Workgroup as the GR Restructuring Steering Committee to meet quarterly to do the following:</p> <ul style="list-style-type: none"> <li>▪ Work together on the implementation process;</li> <li>▪ Review evaluation data and make recommendations for any adjustments to processes or targets; and</li> <li>▪ Identify and pursue opportunities for GR service integration.</li> </ul> <p>(Updated 2/3/11)</p>	<p>All GR Restructuring Workgroup members were invited to be part of the specific workgroups for the individual recommendations.</p> <p>The first quarterly meeting of the GR Restructuring Steering Committee was held on July 27. The group was given a status update on each of the 42 recommendations.</p>	<p>IMPLEMENTED JUNE 2010</p>	

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